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Bib Data Sheet

CONFIRMATION NO. 7738

SERIAL NUMBER 09/724,926	FILING DATE 11/28/2000 RULE	CLASS 348	GROUP ART UNIT 2613	ATTORNEY DOCKET NO. TVABST
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**APPLICANTS**

David Michael Geshwind, New York, NY;

**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLICATION IS A CIP OF 08/483,205 06/07/1995 6507872  
 AND A CIP OF 09/504,605 02/15/2000  
 WHICH IS A CIP OF 08/485,384 06/07/1995 PAT 6,025,882  
 AND A CIP OF 08/485,385 06/07/1995 ABN  
 THIS APPLICATION 09/724,926 11/28/2000  
 IS A CIP OF 07/951,267 09/25/1992 6590573  
 AND A CIP OF 07/800,325 12/02/1991

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
**\*\* 04/02/2001**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 23	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

**ADDRESS**

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 NEW YORK , NY 10003

**TITLE**

Process and device for multi-level television program abstraction

FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit